FORM D

3/1835





FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

	SEC U	JSE ONLY
Prefix		Serial
	DATE F	ECEIVED

UNIFORM LIMITED OFFERING EXEMPT	ION DATE RECEIVED
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Tnemec Company, Inc. 2005 Class B Common Stock Offering	PECEIVED 2005
	ULOE MAY 1 3 2004
Type of Filing: Amendment Amendment	
A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer	130/8/
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Themec Company, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 6800 Corporate Drive, Kansas City, MO 64120	Telephone Number (Including Area Code) (816) 483-3400
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business: PROCESSE	0 40
Manufacturer of industrial coating Type of Business Organization AND 1 9 2005	<u></u>
The state of the s	er (please specify
Actual or Estimated Date of Incorporation or Organization: Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada: FN for other foreign jurisdiction)	☐ Estimated
GENERAL INSTRUCTIONS	

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state of exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASI	C ID	ENTIFICATION DA	TA			
Enter the information requested for the followard for the information requested for the followard for the issue, if the issue Each beneficial owner having the power Each executive officer and director of Each general and managing partner of Each general and managing partner of the information requested for the information requested for the information requested for the information requested for the followard for the information requested for the information r	er has b er to vo corpora	te or dispose, or direct to the issuers and of corporate	the vo	te or disposition of, 10	1% or m artners o	ore of a class of e of partnership issu	quity securities of ers; and	of the issuer;
Check Box(es) that Apply: ☐ Promoter		Beneficial Owner		Executive Officer	⊠	Director		General and/or
Full Name (Last name first, if individual)				·				Managing Partner
Bean, Jr., Albert C. Business or Residence Address (Number and	Stree	t, City, State, Zip Code))					
6800 Corporate Drive, Kansas City, MO	64120							
Check Box(es) that Apply: Promoter		Beneficial Owner	Ø	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if individual)								
Osborne, Thomas C.								
Business or Residence Address (Number and	i Stree	t, City, State, Zip Code)					
6800 Corporate Drive, Kansas City, MO	64120							
Check Box(⇔) that Apply: ☐ Promoter		Beneficial Owner	×	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if individual)								
Eiserer, Steven D.								
Business or Residence Address (Number and	1 Stree	t, City, State, Zip Code)					
6800 Corporate Drive, Kansas City, MO	64120							
Check Box(es) that Apply: ☐ Promoter			Ø	Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, if individual)	-	······································						
Bauer, Robert M.								
Business or Residence Address (Number an	d Stree	t, City, State, Zip Code	()		·			
6800 Corporate Drive, Kansas City, MO	64120							
Check Box(es) that Apply: ☐ Promoter		Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, if individual)								
Cortelyou, Peter F.								
Business or Residence Address (Number an	d Stree	et, City, State, Zip Code	;)					
6800 Corporate Drive, Kansas City, MO	64120	l						
Check Box(es) that Apply: ☐ Promoter			×	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if individual)								
Bean, IV, Albert C.								
Business or Residence Address (Number an	d Stree	et, City, State, Zip Code	e)					
6800 Corporate Drive, Kansas City, MO	64120							
Check Box(∞) that Apply: ☐ Promoter		Beneficial Owner		Executive Officer	⊠	Director		General and/or Managing Partner
Full Name (Last name first, if individual)								
Palmer, Steven N.								
Business or Residence Address (Number an	d Stree	et, City, State, Zip Code	;)					
000 Miles 4541 Ct	4110							

800 West 47th Street, Kansas City, MO 64112

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	A. BASI	C IDI	ENTIFICATION DA	TA _			
 Enter the information requested for the followard for the information requested for the followard for the issuer, if the issuer Each beneficial owner having the power Each executive officer and director of content for the followard formation in the followard formation for the followard formation for the followard formation for the followard formation for the followard formation requested for the followard for the followard formation for the followard for the foll	has been organized within the to vote or dispose, or direct propriate issuers and of corporate	he vo	te or disposition of, 10				of the issuer;
Check Box(⊗) that Apply: ☐ Promoter	⊠ Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if individual)						·-	
Bean, Melanie Business or Residence Address (Number and	Street City State Zin Code)						
Business of Residence Address (Number and	Street, City, State, Zip Code)						
666 West End Avenue, Apt. 7F, New York,	NY 10025						
Check Box(es) that Apply: Promoter	☐ Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if individual)		_					
Higgins, Kimbrough							
Business or Residence Address (Number and	Street, City, State, Zip Code)					
6720 Overhill Road, Shawnee Mission, KS	66208						
Check Box(es) that Apply: Promoter	☐ Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, if individual)							ivianaging raturer
Fountain, Robert F.							
Business or Residence Address (Number and	Street, City, State, Zip Code)					
4914 W. 114 th Street, Leawood, KS 66211							
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner		Executive Officer	\boxtimes	Director		General and/or Managing Partner
Full Name (Last name first, if individual)							
Miller, Jr., Donald J.							
Business or Residence Address (Number and	Street, City, State, Zip Code)					
11 Upton Drive, Wilmington, MA 01887							
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	\boxtimes	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if individual)		-					
Briand, Remi							
Business or Residence Address (Number and	Street, City, State, Zip Code)					
123 W. 23 rd Avenue, North Kansas City, M	10 (411)						
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	\boxtimes	Executive Officer		Director		General and/or
	- Belieficial Owlief					L	Managing Partner
Full Name (Last name first, if individual)							
Jones, Gary M.							
Business or Residence Address (Number and	Street, City, State, Zip Code)					
123 W. 23 rd Avenue, North Kansas City, M	IO 64116						

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		В.	INFORMATI	ION ABOL	T OFFERI	NG						- V	N
l.	Has the issue	r sold, or doe	es the issuer int	tend to sell,	to non-accree	dited investor	rs in this offe	ring?				Yes ⊠	No □
				Answer	also in Apper	ndix, Column	2, if filing u	nder ULOE.					
2.	What is the r	ninimum inve	estment that w	ill be accept	ted from any	individual?				•••••		\$ <u>_5(</u>	<u> 10</u>
3.	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?				No ⊠								
1 .	solicitation or registered wi	of purchasers ith the SEC a	in connection and/or with a st	with sales of ate or states	of securities in a first the name.	n the offering se of the brok	g. If a persor er or dealer.	n to be listed	is an associa	ted person or	agent of a b	roker o	r dealei
Full Na None	ime (Last name	first, if indiv	vidual)		-								
Busine	ss or Residence	Address (N	umber and Stre	eet, City, Sta	ate, Zip Code)							
Name	of Associated E	Broker or Dea	nler		.					- 			
States	in Which Perso	n Listed Has	Solicited or In	itends to So	licit Purchase	ers							
(Check	"All States" o	r check indiv	ridual States)		•••••	••••••	***************************************	•••••••	••••••			□ All S	States
[AL] [IL] [MT] [RT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[M [PA	O] N]
							<u> </u>			<u> </u>			
Busine	ess or Residence	e Address (N	umber and Stre	eet, City, St	ate, Zip Code	·)							
Name	of Associated I	3roker or Dea	aler								····		
States	in Which Perso	n Listed Has	Solicited or In	ntends to So	licit Purchase	ers							
(Check	k "All States" o	r check indiv	vidual States)		••••••••	••••••		••••••	·····			□ All S	States
[AL] [IL] [MT] [RT]	[IN] [NE] [SC]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[M [P/	O] A]
, un in	ame (Last nam	z mat, n mai	vidualy										
Busine	ess or Residenc	e Address (N	umber and Str	eet, City, St	ate, Zip Code	e)							
Name	of Associated I	Broker or Dea	aler										
States	in Which Perso	n Listed Has	s Solicited or Ir	ntends to So	licit Purchase	ers							
(Check	k "All States" o	r check indiv	vidual States)	••••••								.□All s	States
[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[IC [M [P/	Ŏ] ¥]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

exchanged. Type of Security	Aggregate Offering Price		Amount So	Already ld
			6	0
Debt	\$ <u> </u>			0
Equity	\$ <u>990,795</u>		\$ <u>83,8</u>	<u>336.50</u>
☑ Common ☐ Preferred				
Convertible Securities (including warrants).	\$0		\$	0
Partnership Interests	\$0		\$	0
Other (Specify)	\$ \$		\$	0
Total	\$ <u>990,795</u>		\$ <u>83,</u>	836.50
Enter the number of accredited and non-accredited investors who have purchased securities in thi amounts of their purchases. For offerings under Rule 504, indicate the number of persons who ha aggregate dollar amount of their purchases on the total lines. Enter"0" if answer is "none" or "zero aggregate dollar amount of their purchases on the total lines.	ve purchased securities and		Dollar	regate Amount chases
Accredited Investors	6		S7	6,215.00
Non-accredited Investors	3		\$	7,621.50
Total (for filings under Rule 504 only)			\$	
Total (for filings under Rule 504 only)			\$	
	rities sold by the issuer, to da		Dolla	ır Amount
Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all secur offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in the type listed in Part C - Question 1.	rities sold by the issuer, to dissoffering. Classify securiti Type of Security		Dolla	
Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all secur offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in the type listed in Part C - Question 1. Type of offering Rule 505	rities sold by the issuer, to do s offering. Classify securiti Type of Security		Dolla	0 0
Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all secur offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in the type listed in Part C - Question 1. Type of offering Rule 505	rities sold by the issuer, to do s offering. Classify securiti Type of Security		Dolla S SS	0 0 0
Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all secur offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in the type listed in Part C - Question 1. Type of offering Rule 505 Regulation A	rities sold by the issuer, to discoffering. Classify securiti Type of Security	es by	Dolla S S S S S S Dounts	0 0 0
Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all secur offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in the type listed in Part C - Question 1. Type of offering Rule 505 Regulation A	rities sold by the issuer, to discoffering. Classify securitic Type of Security	es by	Dolla S S S S S S Dounts	0 0 0
Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all secur offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in the type listed in Part C - Question 1. Type of offering Rule 505 Regulation A	rities sold by the issuer, to discoffering. Classify securitic Type of Security	es by ude amo e amour	Dolla S S S S S S Dounts	0 0 0 0
Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all secur offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in the type listed in Part C - Question 1. Type of offering Rule 505 Regulation A. Rule 504 Total. a. Furnish a statement of all expenses in connection with the issuance and distribution of the secur relating solely to organization expenses of the issuer. The information may be given as subject to an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees.	rities sold by the issuer, to dis offering. Classify securiti Type of Security	ude amo	Dolla S S S S S S Dounts	0 0 0 0 0
Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all secur offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in the type listed in Part C - Question 1. Type of offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securelating solely to organization expenses of the issuer. The information may be given as subject to an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs	rities sold by the issuer, to dis offering. Classify securiti Type of Security	ude amo	Dolla S S S S S S Dounts	0 0 0 0 0 0 1,000
Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all secur offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in the type listed in Part C - Question 1. Type of offering Rule 505 Regulation A	rities sold by the issuer, to dis offering. Classify securiti Type of Security	ude amoun	Dolla S S S S S S Dounts	0 0 0 0 0 0 1,000 7,500
Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all secur offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in the type listed in Part C - Question 1. Type of offering Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the secur elating solely to organization expenses of the issuer. The information may be given as subject to an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees	rities sold by the issuer, to dis offering. Classify securiti Type of Security	ude amour	Dolla S S S S S S Dounts	0 0 0
Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all secur offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in the type listed in Part C - Question 1. Type of offering Rule 505 Regulation A	rities sold by the issuer, to dis offering. Classify securiti Type of Security	ude amour	Dolla S S S S S S Dounts	0 0 0 0 0 0 1,000 7,500

C. OFFERING P	RICE, NUMBER OF INVESTORS, EXPENSES AND U	SE OF	PROCE	EDS			
b. Enter the difference between the agresponse to Part C - Question 4.a. This d	gregate offering price given in response to Part C - Question ifference is the "adjusted gross proceeds to the issuer."	landit	total expen	ises furni	ished ii	ı \$	974,595
the amount for any purpose is not known	furnish an estimate and check the box to the left of the esting	nate. T	The total of	oses sho	wn. If nents		
			Officers Directors.	<u>. &</u>	<u>P</u>	ayments to Others	
Salaries and fees			\$	0		\$ 0	
Purchase of real estate	with amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If or any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments qual the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above. Payment to Officers. Payments to Officers						
Purchase, rental or leasing and inst		\$	0		\$ 0		
Construction or leasing of plant bu	ildings and facilities		\$	0		\$ 0	
			\$	0		\$ <u> </u>	
Repayment of indebtedness			\$	0		\$	
b. Enter the difference between the aggregate offering proce given in response to Part C - Question L and total expense response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purpose the amount for any purpose is not known, furnish an estimate and heck the box to the left of the estimate. The total of the listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above. Parment to Officers, S. Directors, S. Construction or leasing of plant buildings and facilities Salaries and fees Purchase, rental or leasing and installation of machinery and equipment. Acquisition of other businesses (including the value of securities involved in this afficing that may be used in exchange for the assets or securities of another issuer pursuant to a merger). Repayment of indebtedness. Working capital. Other (specify): Column Tetrals Total Payments Listed (Column totals added) D. FEDERAL SIGNATURE issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filled under Rule 50 and ertaking by the issuer to familia to the U.S. Securities and Exchange Commission, upon written request of its staff, the informations by the issuer to familia to the U.S. Securities and Exchange Commission, upon written request of its staff, the information S granter Processing the staff of the part of the Signature Processing the staff of the Signature Processing the Signature Proces	0	\boxtimes	\$ <u>974,595</u>				
			\$	0		s 0	
Column Totals			\$	0	\boxtimes	\$ <u>974.595</u>	
Total Payments Listed (Column to	tals added)			⊠ \$_9	7 <u>4,595</u>		
Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4 h. above. Payment to Officers							
an undertaking by the issuer to furnish to the U.S. S	by the undersigned duly authorized person. If this notice is securities and Exchange Commission, upon written request of						
Issuer (Print or Type)	Signature	Date	/				
			5/1.	3/6	5	<i>.</i>	
				G .	.	6E' 1.10	. 00
Steven D. Eiserer	Secretary, Treasurer, and Vice President of Finance	and In	iformation	System	s, Chi	ef Financial C	ifficer
), MA						
							ments to Others 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
						•	
	ATTENTION						
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4 a. This difference is the "adjusted gross proceeds to the issuer." \$	·						

_	E. STATE SIGNATURE
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized son.
İssı	uer (Print or Type) Signartire Date 5/13/65
Na	me (Print or Type) Title (Print or Type)
Ste	even D. Eiserer Secretary, Treasurer, and Vice President of Finance and Information Systems, Chief Financial Officer

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

ı	Intend to non-accre investors (Part B-It	edited in State	Type of security and aggregate offering price offered in state (Part C-Item I)	4	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL								 	
AK	-								
AZ	<u> </u>		 						
AR	X		Class B Common \$990,795	1	\$10,162				X
со									
СТ_									
DE			<u> </u>					ļ 	ļ
DC								<u> </u>	-
FL									
GA		-							-
Н		 							
ID IL		X	Class B Common \$990,795			2	\$7,113.40		X
IN									
lA									
KS		X	Class B Common \$990,795	1	\$25,405.00	1	\$508.10		X
КҮ									
LA		 	 	ļ				ļ	-
ME	-								
MD				-					
MA								-	
MI MN									
MS									
мо	 								

1	non-a investo	d to sell to ccredited ors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item I)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT									
NE									<u> </u>
NV		-				-		-	ļ
NH								-	ļ
NJ									
NM									<u> </u>
NY									
NC		ļ						<u> </u>	
ND			Class B Common				 		1
ОН	X	<u> </u>	\$990,795	1	\$5,081				X
ок_		<u> </u>						<u> </u> -	
OR									
PA_	X		Class B Common \$990,795	1	\$5,081				X
Ri									
SC									
SD									
TN									
TX								<u> </u>	<u> </u>
UT									
VT									
VA									
WA						,			
wv									
WI									
WY	X		Class B Common \$990,795	2	\$30,486				X
PR									